TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE	
STATE PLAN MATERIAL			
	03-42	New York	
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF T SOCIAL SECURITY ACT (MEDICAID)		
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE		
HEALTH CARE FINANCING ADMINISTRATION			
DEPARTMENT OF HEALTH AND HUMAN SERVICES	1. May 15, 2003* 2. July 1, 2003**		
5. TYPE OF PLAN MATERIAL (Check One):			
□ NEW STATE PLAN □ AMENDMENT TO BE CONS		AMENDMENT	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMEND		nendment)	
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR Part 447, Subpart C	7. FEDERAL BUDGET IMPACT:		
42 CFR Fait 447, Suopart C	1. * a. FFY 5/15/03-9/30/03 \$0 b. FFY 10/1/03-9/30/04 \$0		
9 DACE NUMBER OF THE REAN GEOTION OF ATTACH CITY	2.** a. FFY 7/01/03 – 9/30/03 \$: b. FFY 10/01/03 – 9/30/04 \$1 9. PAGE NUMBER OF THE SUPERSE		
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	SECTION OR ATTACHMENT (If App.		
Attachment 4.19-A, Pages 185, 188,188(b), 188(b)(1), 188(b)(2)  Attachment 4.19-A, Pages 185, 188,188(b), 188(b)(1), 188(b)(1), 188(b)(2)			
10. SUBJECT OF AMENDMENT: Inpatient Hospital Services  1.* Revised Definition of "Eligible Rural Hospital" for High N  2.** Continuation of Indigent Care Distributions	eed Indigent Care Payments		
11. GOVERNOR'S REVIEW (Check One):  ☐ GOVERNOR'S OFFICE REPORTED NO COMMENT ☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED ☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	☐ OTHER, AS SPEC	CIFIED:	
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:		
RAMAN- Kahman	New York State Department of He		
13. TYPED NAME: Kathryn Kuhmerker	ker Tower, Empire State Plaza, Albany, New Yo		
14. TITLE: Deputy Commissioner  Department of Health  15. DATE SUBMITTED:			
June 27, 2003			
FOR RECIONAL OF IT		an und Appendiction	
17 DATE RECEIVED: UN ED 2002	18-DAREMAPPROMED;	2004	
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21 TYPED NAME: 1	22 1111		
Charlene Brown	Departy Director at a	Sn:	
23. REMARKS:		The Control of the Co	

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- (1) For rate years commencing January 1, 1991 and prior to January 1, 1997, each eligible major public general hospital shall receive a portion of its bad debt and charity care need equal to 110 percent of the result of the application of the percentage of statewide inpatient reimbursable costs excluding costs related to services provided to beneficiaries of Medicare, developed on the basis of 1985 financial and statistical reports, to the statewide resources for the rate year. For rate periods commencing January 1, 1997 through December 31, [2002] 2004, each eligible major public general hospital shall receive an amount equal to the amount allocated to such major public hospital for the period January 1, 1996 through December 31, 1996. For the period January 1, [2003] 2005 through June 30, [2003] 2005, each eligible major public general hospital shall receive an amount equal to one-half the amount allocated to such major public hospital for the period January 1, 1996 through December 31, 1996.
- (2) For rate periods prior to January 1, 1997, the balance of the statewide resources after the Medicaid disproportionate share payments are made in accordance with paragraph (1) of this subdivision shall be distributed to voluntary sector hospitals on the basis of each hospital's targeted need share. For rate periods commencing January 1, 1997 and thereafter, the balance of unallocated funds after the Medicaid disproportionate share payments are made in accordance with paragraph (1) of this subdivision and funds are reserved for distribution as high need adjustments in accordance with subdivision (h) of this section and shall be distributed to eligible hospitals, excluding major public general hospitals, on the basis of targeted need share adjusted for transition factors pursuant to subdivision (i) of this section.
- (i) Need calculations shall be based on need data for the year 2 years prior to the rate year.
- (ii) For the rate periods commencing January 1, 1991 and prior to January 1, 1997, the scale specified in subparagraph (iii) of this paragraph and for rate periods commencing January 1, 1997 and thereafter, the scale specified in subparagraph (iv) shall be utilized to calculate individual hospital's nominal payment amounts on the basis of the percentage relationship between their need for the year 2 years prior to the rate year and their patient service revenues for the year 2 years prior to the rate year.
- (iii) The scale utilized for development of each hospital's nominal payment amount shall be as follows:

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the revenue associated with referred ambulatory patients. The charges shall be collected for the entire year, reduced to cost, and compared to the amount of bad debt and charity care distributions received by the hospital for such services. This data shall be collected on forms and in a manner prescribed by the commissioner of health.

- (h) For rate periods commencing January 1, 1997 through December 31, [2002] 2004, \$36 million and for the period January 1, [2003] 2005 through June 30, [2003] 2005, \$18 million shall be distributed as high need adjustments to general hospitals, excluding major public general hospitals, with nominal payment amount in excess of 4 percent of reported costs as follows: each general hospital's share shall be based on such hospital's aggregate share of nominal payment amount above 4 percent of reported costs compared to the total aggregate nominal payment amount above 4 percent of reported costs of all eligible hospitals.
- (i) For rate periods commencing January 1, 1997 and thereafter, distributions to general hospitals described in subdivisions (d)(2) and (h) of this section shall be adjusted as follows:
  - (1) For general hospitals which qualified for distributions pursuant to section 86-1.66 of this Subpart as of December 31, 1995:
    - (i) For the rate period commencing January 1, 1997 and ending December 31, 1997, each such general hospital shall receive as an allocation 100 percent of the projected distribution to such general hospital pursuant to paragraph (4) of subdivision (d) of this section for 1996.
    - (ii) For the rate period commencing January 1, 1998 and ending December 31, 1998, each such general hospital shall receive as an allocation 75 percent of the amount determined in accordance with subparagraph (i) of this paragraph and 25 percent of the amount determined in accordance with subdivision (h) of this section.

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qualified for distributions pursuant to section 86-1.66 of this Subpart, shall be adjusted as follows:

- (i) For each category specified in this subdivision, 50 percent of the amount by which the allocation calculated pursuant to subdivisions (d)(2), (h) and (i) of this section for rate periods commencing on and after January 1, 1997 exceeds the projected distribution calculated pursuant to subdivision (d)(2) of this section for 1996 and, if applicable, section 86-1.84 of this Subpart for 1996 shall be reserved by the Commissioner for allocation to general hospitals within such category that would experience a loss based on each such general hospitals within such category, provided however, that the amount reserved within a category shall not exceed the aggregate amount of losses within such category.
- (k) Supplemental indigent care distributions. From funds in the pool for each year, \$27 million shall be reserved on an annual basis for the periods January 1, 2000 through December 31, [2002] 2004 and \$13.5 million shall be reserved for the period January 1, [2003] 2005 through June 30, [2003] 2005 to be distributed to each hospital on a proportionate share basis, provided that no hospital shall receive less than the graduate medical education reduction amount calculated pursuant to State law, subject to hospital specific disproportionate share payment limits calculated in accordance with section 86-1.87 of this Subpart.
- (I) High Need Indigent Care Adjustment Pool. Funds allocated pursuant to State law shall be deposited as authorized and used for the purpose of making Medicaid disproportionate share payments within the limits established on an annualized basis pursuant to section 86-1.87 of this Subpart, for the period January 1, 2000 through June 30, [2003] 2005, in accordance with the following:
  - (1) From the funds in the pool each year:
  - (i) Each eligible rural hospital shall receive \$140,000 on an annualized basis for the periods January 1, 2000 through December 31, [2002] 2004 and \$70,000 for the period January 1, [2003] 2005 through June 30, [2003] 2005, provided as a disproportionate share payment; provided, however, that if such payment pursuant to this subparagraph exceeds a hospital's applicable disproportionate share limit, then the total amount in

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excess of such limit shall be provided as a nondisproportionate share payment in the form of a grant directly from this pool;

(ii) Each such hospital shall also receive an amount calculated by multiplying the facility's uncompensated care need by the appropriate percentage from the following scale based on hospital rankings developed in accordance with each eligible rural hospital's weight as defined by this section:

Percentage Coverage of Uncompensated Care Need		
60.0%		
52.5%		
45.0%		
37.5%		
30.0%		
22.5%		
15.0%		
7.5%		

- (iii) "Eligible rural hospital", as used in this subdivision, shall mean a general hospital classified as a rural hospital for purposes of determining payment for inpatient services provided to beneficiaries of title XVIII of the federal social security act (Medicare) or under state regulations, or a general hospital with a service area which has an average population of less than 175 persons per square mile, or a general hospital which has a service area which has an average population of less than two hundred persons per square mile measured as population density by zip code. The average population of the service area is calculated by multiplying annual patient discharges by the population density per square mile of the county of origin or zip code as applicable for each patient discharge and dividing by total discharges. Annual patient discharges shall be determined using discharge data for the 1997 rate year, as reported to the commissioner by October 1, 1998. Population density shall be determined utilizing United States census bureau data for 1997.
- (iv) "Eligible rural hospital weight", as used in this subdivision, shall mean the result of adding, for each eligible rural hospital:

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- (a) The eligible rural hospital's targeted need, as defined in paragraph (5) of subdivision (b) of this section, minus the mean targeted need for all eligible rural hospitals, divided by the standard deviation of the targeted need of all eligible rural hospitals; and
- (b) The mean number of beds of all eligible rural hospitals minus the number of beds for an individual hospital, divided by the standard deviation of the number of beds for all eligible rural hospitals.
- (2) From the funds in the pool each year, \$36 million on an annualized basis for the periods January 1, 2000 through December 31, [2002] 2004 and \$18 million for the period January 1, [2003] 2005 through June 30, [2003] 2005, of the funds not distributed in accordance with paragraph (1) of this subdivision, shall be distributed in accordance with the formula set forth in subdivision (h) of this section.
- (3) From the funds in the pool each year, any funds not distributed in accordance with paragraphs (1) or (2) of this subdivision, shall be distributed in accordance with the formula set forth in subdivision (d) of this section.

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